



AMENDMENT TRANSMITTAL LETTER			DOCKET NUMBER: P-UC 4530	
SERIAL NO: 09/780,576	FILING DATE: February 9, 2001	EXAMINER: R. Li	GROUP ART UNIT: 1646	
INVENTION: ADP-GLUCOSE RECEPTOR				

TO COMMISSIONER FOR PATENTS

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING
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Enk Munbert
(TYPED OR PRINTED NAME OF PERSON MAILING PAPER OR FEE)

Enk Munbert
(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Transmitted herewith is a Response to the Office Action,
mailed September 24, 2002, in the above-identified application.

- ☐ Small Entity status of this application has been
established under 37 CFR 1.27.
- ☒ Petition for a one-month Extension of Time is enclosed
(in duplicate).
- ☐ Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is
enclosed.
- ☒ Appendix 1
- ☒ Exhibits A-G
- ☒ Figures 2-5
- ☐ No additional claims fee is required.
- ☒ An additional claims fee is required and has been
calculated as shown below:

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CLAIMS AS AMENDED

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	28	-	33	-	0	x	\$9	\$18	=	\$	\$0.00
INDEPEN- DENT CLAIMS	8	-	7	-	1	x	\$42	\$84	=	\$	\$84.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			YES		X NO		\$140	\$280	=	\$	\$0.00
							TOTAL ADDITIONAL FEE			\$	\$84.00

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in
this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in
this space.

Inventors: Civelli et al.
Serial No.: 09/780,576
Filed: February 9, 2001
Page 2

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

___ Please charge my Deposit Account No. 03-0370 the amount of \$_____. A duplicate copy of this sheet is enclosed.

X A check in the amount of \$194.00 is enclosed, \$110.00 of which covers the fee for a one-month extension of time and \$84.00 of which covers the additional claims fee.

X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 03-0370. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge to Deposit Account No. 03-0370 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

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